



RECEIVED
JUL 16 2004
Technology Center 2600

Director, the Commissioner for Patents
Washington, D.C. 20231

Date 8 22 00
Mo. Day Yr.
Atty. Docket 35C14671
Application No. 091628347

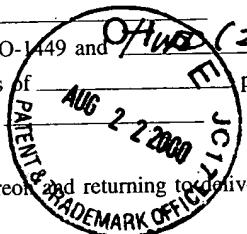
Sir: Kindly acknowledge receipt of the accompanying:

- ☐ Response to Official Action. _____
- ☐ Check for \$ _____ (claims fee)
- ☐ Petition under 37 CFR 1.136 and Check for \$ _____
- ☐ Notice of Appeal and Check for \$ _____
- ☒ Information Disclosure Statement, PTO-1449 and Office (2) documents
- ☐ Claim for priority and certified copies of _____ priority applications
- ☐ Issue fee transmittal and Check for \$ _____
- ☐ Other (specify) _____

by placing your receiving date stamp hereon and returning to deliverer. Asy Hauer

Atty. Int. mail Due Date 8 22 00
Mo. Day Yr.

FOHS-D-95





RECEIVED

JUL 16 2004

Technology Center 2600

Director, the Commissioner for Patents
Washington, D.C. 20231

Date 11 12 100
Mo. Day Yr.

Atty. Docket 35C14671

09/628.347

Sir:

Kindly acknowledge receipt of the accompanying:

- ☐ Specifications, claims and abstract _____ pages, with Transmittal Form
- ☒ Oath or Declaration and Power of Attorney ☒ Executed ☐ Not Executed
- ☐ _____ Sheets of _____ formal _____ informal drawings
- ☒ Check for \$ 130.00 (filing fee) Summary
- ☐ Small entity declaration
- ☐ Assignment, PTO-1595 and Check for \$ _____
- ☐ Transmittal Under 37 CFR 1.53(d) (CPA)
- ☐ Petition under 37 CFR 1.136 and check for \$ certified
- ☒ Other (specify) claim to Priority 1 + 2 Priority documents
- by placing your receiving date stamp hereon and mailing or returning to deliverer.
- This is a ☐ Continuation ☐ Divisional ☐ Continuation-In-Part

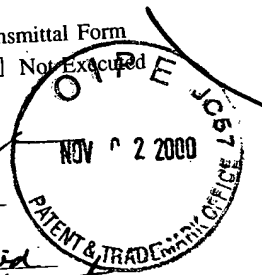
Atty. John A. W.

Due Date 11 19 100
Mo. Day Yr.

37 CFR 1.8 ☐
37 CFR 1.10 ☐
By Hand ☒

FOHS-A-95

5





In re Application of:

HIROCHIKA MATSUOKA

Application No.: 09/628,347

Filed: July 28, 2000

For: PATCH IMAGE PREPARATION METHOD
AND RECORDING MEDIUM THEREFOR

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 7	MINUS	** 20	= 0	x \$9 \$18	\$0.00
INDEP. CLAIMS	* 3	MINUS	*** 6	= 0	x \$43 \$86	\$0.00
Fee for Multiple Dependent claims \$145°/\$290						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT---						\$0.00

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

Docket No. 03500.014671.

Examiner: M. Nguyen

Group Art Unit: 2626

Date: July 7, 2004

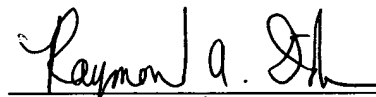
RECEIVED

JUL 16 2004

Technology Center 2600

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☐ A check in the amount of \$_____ is enclosed.
- ☐ Charge \$_____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☐ A check in the amount of \$_____ to cover the fee for a _____ month extension is enclosed.
- ☐ A check in the amount of \$_____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,



Raymond A. DiPerna
Attorney for Applicant

Registration No. 44,063

FITZPATRICK, CELLA, HARPER & SCINTO
30 Rockefeller Plaza
New York, New York 10112-3800
Facsimile: (212) 218-2200

NY_MAIN 438873v1